

be settled. Education, practical to the extreme, and if necessary compulsive, through State or city boards of health, can alone serve to remedy those evils which are confronting the medical profession of the country.

COMMUNICATION.

(The following letter, relative to the publication of a monthly journal, will, we believe, interest our readers in that it presents the views of one who, from his former position as editor of a State journal, and who has been active in Association work for some time, is fully competent to speak from experience.—ED.)

A MONTHLY JOURNAL VERSUS A YEARLY VOLUME OF TRANSACTIONS.

To the Editor of the Journal.—From time to time the question as to the real value of a monthly journal, owned by a State Society, is seriously considered, and varied objections are made toward its continuance. The objections are as follows:

First, the expense; second, its naturally limited field of publication; third, competing with established journals, and fourth, its doubtful utility as a means of inter-communication between members.

Expense.—A yearly bound volume of the transactions is almost as expensive as twelve numbers sent monthly. The bound volume is all solid matter, and there is no income. The monthly journals contain ethical advertisements which materially reduce the cost of publication, and will ultimately prove a source of revenue.

Limited Field of Publication.—Writers of repute are naturally averse to having their work "buried" in a journal of limited circulation, and many journals are desirous of publishing their articles. In such cases I arranged, during my editorship of the *New York State Journal of Medicine*, to have important articles published in the journal selected by the authors, and in the *State Journal*, simultaneously.

Properly conducted State journals do not compete with other journals, in that the former are reserved solely for such papers as are read in State and county associations.

As a means of intercommunication between members, conveying records of official action, suggestions as to new work, and constantly keeping the advantage of membership before the profession, a monthly journal is of incalculable value. This we have demonstrated over and over again. For instance, in former years, through the liberality of committees on publication, many more volumes of the yearly transactions were ordered than were necessary, and there were on hand recently over 2,000 such books, on which the storage expense was quite large. At the request of the treasurer, I inserted a notice that full sets of eighteen volumes each would be given to members who would pay freight charges. The responses were prompt and gratifying, and a large number of these volumes were placed where they would be appreciated, and our end attained. News items from time to time, relative to fellow members, are eagerly read. Association news is always interesting, and editorials on the art as well as the science of medicine, find sympathetic readers. Altogether, then, the value of a monthly journal is incontestible, and those who have given this manner of presenting official news of the State organization a fair trial would never go back to old methods.

EMIL MAYER.

New York, March 11, 1903.

VETO MESSAGE OF OSTEOPATH BILL BY GOVERNOR HEBER M. WELLS, - OF UTAH, MARCH 16, 1903.

To the Senate:

I herewith return, without my approval, Senate Bill No. 131, entitled, "An act declaring the practice of osteopathy not to be the practice of medicine and surgery, within the meaning of Title 52, Revised Statutes of Utah, 1898, and regulating the practice of osteopathy in the State of Utah."

The saving of human life, whether by means of looking to the prevention of disease, or by means calculated to cure disease already established, will be admitted without question to be the proper climax of professional ambition, as well as the highest humanitarian desire of legislative enactment. In both these directions, the State of Utah, by vigorous sanitary laws, and by strict requirements as to the quality of medical practitioners, stands well in the forefront of enlightened and progressive commonwealths.

Only through conviction should we venture to weaken in any degree these safeguards, which experience and observation have proven to be beneficent and satisfactory.

PRACTICE IN MEDICINE.

Whatever the term or nature of the tenets of the particular school which this bill aims to recognize, its practice must, it seems to me, be considered a branch of the science of medicine. After all, the physician, of whatever school or designation, has to deal with the same physiology, the same conditions, the same laws of cause and effect, in health and disease. All practitioners may not have the same knowledge and the same skill, yet our statutes have wisely provided, as a matter of public policy and protection, that a certain amount of skilled knowledge all of them must have.

It requires considerable honesty in any practitioner to admit that a case in hand is beyond his powers. His training may be limited, his pretensions modest; but the consequence of his weakness in refusing to concede it are equally dangerous. The natural treatment of any physical disorder is necessarily determined by a diagnosis of a case—a preliminary of first and absolute importance. To do the wrong thing by performing dangerous manipulations, or to do nothing at all—either of which courses is easily open to the unskilled—may be equally fatal. The peril is not lessened if the physician, perhaps by happy accident or coincidence, has discovered the true condition.

HUMAN LIFE PRECIOUS.

The foregoing suggests that the treatment of disease should not be permitted to be a matter of mere experiment; and, inasmuch as the authority to practice presupposed an acquaintance with the science, as recognized by all the regular

schools, any knowledge short of that should be deemed insufficient. I consider it unfair and dangerous, therefore, to allow the adherents of osteopathy, or of any other school, to practice without undergoing the ordinary tests to which other practitioners have to submit. The specialist may go so far as his talents and inclination may carry him, and the public be benefited by his advancement, but the fundamental and essential knowledge which every physician ought to have, cannot safely be waived or ignored.

SAFEGUARDS SWEEP AWAY.

Science is progressive; advancement cannot be stayed, in the art of healing, least of all; and the dogmatism of disputants, whether in medicine or anything else, must soon yield to the light of truth and reason. Whatever merit osteopathy may have, will assuredly find recognition. The present contention is, that in the bill before me, the necessary requirements and safeguards with which the law surrounds the physically afflicted, are thrown down and swept away. To this I am unwilling to consent. No practitioner of this school, who possesses the qualifications required of the practitioners of other schools, needs such a law. I deem it unwise to enact it for the benefit of those who have not those qualifications. Whenever all who seek to engage in the healing art shall be equally recognized as competent, under the regulations now generally established, one medical law will be sufficient. This condition complied with, it would give me sincere pleasure to name as a member of our State Board of Medical Examiners an adherent of the very school in whose behalf this piece of legislation is proposed.

(Signed) HEBER M. WELLS, Governor.

IODID OF POTASH ERUPTIONS.

Case demonstrated by Dr. Douglas W. Montgomery (through the courtesy of Dr. L. W. Allen) of a tuberculous iodid of potash eruption, presented before the Academy of Medicine, February 24, 1903:

"The eruption is not very well marked now. It has subsided a great deal, as the patient has not taken any iodid of potash for the past three weeks.

"The man gives a history of having had a sore on the penis fifteen years ago, followed by a universal scaly rash. He was then treated for a short time. Some time afterward an ulcer developed on the outer side of the right upper arm, which improved under a so-called blood medicine (patent). Sores continued to break out down the arm, and recently one of them developed on the back of the right hand. It was while this sore was present that he developed an infected wound on the back of the left hand. He flew to his favorite patent medicine, and sores then broke

out on the forehead and scalp. From January 3 to January 20 he took iodid of potash under its proper name, in doses running from ten drops of a saturated solution, three times a day, up to fifty-five drops.

"The lesions were mostly of the tuberculous and papillary variety. Some of the lesions strikingly resemble syphilides, and that on the back of the right hand may be luetic. As far as the tubers were concerned, the diagnosis had to be made between an iodid eruption, mycosis fungoides, and dermatitis coccidioides. Dermatitis coccidioides is a disease peculiar to California, and was first described by Dr. Emmet Rixford and Dr. Gilchrist. Its salient characteristic is the presence in the lesions of capsulated organisms resembling coccidia. No capsulated organisms were found. As for mycosis fungoides, it could be excluded clinically, because of the absence of the itchy eczematous lesions characteristic of that disease. It was therefore concluded that the trouble was the result of taking iodid of potash, and the drug was stopped, whereupon the lesions began steadily to subside. An interesting feature of the case is the close resemblance the microscopic sections of the tuber examined bear to epithelioma. Cases have been known where there was only one such growth as a consequence of taking iodid of potash. In such an event, the solidity of the tumor, its rounded edges, the ulceration and papillary growth on its top, and finally, the appearance of microscopic sections made from it might easily lead one to a diagnosis of epithelioma."

In reply to a question as to external treatment, Dr. Montgomery said:

"There is no treatment but the withdrawal of the drug. In about five weeks the iodid rash will subside, leaving nothing, but in some cases, scars, which may be cribriform. I have one man whom I saw about ten years ago, who had cribriform scars over the nose. It is an oval scar, showing in its floor a lot of indentations representing the follicles of the skin. Some men have advised cutting off the warts and scraping the ulcers out. There is no necessity for doing that as far as I have ever seen. One does not see many of these cases, but I have seen a few, and I have never had occasion to use any active measures. I did give this man acetate of potash. I do not know that the acetate of potash did any good, but you have to give something, and acetate of potash is a diuretic, and may hasten the elimination of the iodid. Ordinary measures for cleanliness are in order. Further than that there is nothing to do. Of course, if the eruption is not recognized, it may lead to serious complications. Although we cut a large piece out of the tuber over the eye, there will be no, or very little scar resulting. The reason for that is that you cut out simply the pathological tissue. Very little, if any, of the real tissue of the neighbor-